

7001 2510 0008 6349 5702
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U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

Case 1:01-cv-00377-SAS-TSH

Document 133-2

Filed 12/30/2003

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OFFICIAL USE

Postage	\$	Postmark Here C-1-01-377 DOC. 133 12/30/03
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	
Sent To DAVID BELLUPS 211-903		
Street, Apt. No., or PO Box No. ROSS CORR INST POB 7010		
City, State, ZIP+4 CHILLICOTHE, OH 45601		